

Submit To: CHIEF ENGINEER
Division of Water Resources
Kansas Department of Agriculture
109 SW 9th Street, 2nd Floor
Topeka, KS 66612-1283
www.ksda.gov/dwr

**APPLICATION FOR ENROLLMENT
IN THE WATER RIGHTS
CONSERVATION PROGRAM
(WRCP)**



State of Kansas

STATUTORY FILING FEE OF \$300.00 MUST ACCOMPANY THIS APPLICATION
(Make check payable to the Kansas Department of Agriculture)

Paragraph Nos. 1, 2, 3 & 4 must be completed. Complete all other applicable portions.

1. Application is hereby made for approval of the Chief Engineer to enroll in the Water Rights Conservation Program (WRCP) for File No. _____.
2. Name of applicant: _____
Address: _____
City, State and Zip: _____
Phone Number: (____) _____ E-mail address: _____
What is your relationship to the water right; ☐ owner ☐ tenant ☐ agent ☐ other? If other, please explain. _____
Name of water use correspondent: _____
Address: _____
City, State and Zip: _____
Phone Number: (____) _____ E-mail address: _____
3. The authorized point(s) of diversion (is) (are) _____
(number of wells, pumps or other works)
- (A) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- (B) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- (C) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- (D) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- ☐ If more space is needed, attach additional sheets as necessary. (please check if additional sheets are attached)
4. It is requested to enroll the Water Right in the WRCP for a total of _____ years (5 to 10 years) from the date of approval in the WRCP until December 31, _____.

For Office Use Only:

F.O. _____ GMD _____ Meets K.A.R. 5-7-4 (YES / NO) Use _____ Source G / S County _____ By _____ Date _____
Code _____ Fee \$ _____ TR # _____ Receipt Date _____ Check # _____

The application must be signed by all owners of the place of use authorized under the water right and his or her spouse, if married. Please indicate if there is no spouse. If land is being purchased under contract, the seller must sign as landowner until such time as the contract is completed.

In the event that all applicants cannot appear before one notary public, they may as necessary sign separate copies of the application before any notary public conveniently available to them. All copies signed in this manner shall be considered to be valid parts of the application.

If the request is signed on behalf of any Owner by someone with legal authority to do so (for example, an agent, one who has power of attorney, or an executor, executrix, conservator), it will be necessary to attach proper documents showing such authority.

I declare that I am an owner of the water right, or that I represent all such owners and am authorized to make this application on their behalf, and declare further that the statements contained herein are true, correct, and complete.

Dated at _____, Kansas, this _____ day of _____, 20_____.

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(If more space is needed for signatures, attach additional sheets as necessary.)

State of Kansas }
County of _____ } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this _____ day of _____, 20_____.

My Commission Expires _____.

Notary Public